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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | Jasmine | |
| | Write the name that is on | First name | First name |
| | your government-issued picture identification (for | Middle name | Middle name |
| | example, your driver's | Parker | |
| | license or passport | Last name | Last name |
| | Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last | First name | First name |
| | 8 years | | |
| | Include your married or | Middle name | Middle name |
| | maiden names. | | |
| | | Last name | Last name |
| | | First name | First name |
| | | That have | Histiliane |
| | | Middle name | Middle name |
| | | | |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social | XXX - XX- 9886 | xxx - xx- |
| | Security number or federal Individual | OR | OR |
| | Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| D | ebtor 1 Jasmine First Name | Parker Middle Name Last Name | Case number (if known) |
|----|--|---|--|
| | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 14335 Kenwood Ave. Number Street | Number Street |
| | | Dolton Illinois 60419 | 27. 0.4 |
| | | City State Zip Code Cook | City State Zip Code |
| | | County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | 0'1 | |
| _ | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |

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| De | ebtor 1 Jasmine | | | Case number (if kno | wn) |
|-----|---|--|--|--|--|
| | First Name | Middle Name Las | st Name | | |
| Pa | rt 2: Tell the Court Abo | ut Your Bankruptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of Bankruptcy (Form B2010)). Also, go Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | |
| 8. | How you will pay the fee | more details about how you me cashier's check, or money ord may pay with a credit card or or a line of the cashier's check, or money ord may pay with a credit card or or a line of the cashier of the ca | nay pay. Typically, if you have a from the check with a pre-printer of the check with a property of the check with a pre-printer of the check with a p | ou are paying the submitting your ed address. this option, sig fficial Form 103 this option only d may do so onl ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, r payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No. Yes. Debtor District Debtor District | <u>W</u> hen <u>W</u> hen | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | No. Go to line 12. | ement About an Eviction | | you want to stay in your residence? St You (Form 101A) and file it with |

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Jasmine First Name
 Parker Last Name
 Case number (if known)

| Fi | irst Name | Middle Name | Last Name | | · · · — | | |
|---|---|---|---|--------------------------------|--|--|---|
| Part 5: E | xplain Your Effo | rts to Receive a Brie | fing About Credit Counse | eling | | | |
| | | About Debtor 1: | | | About Debtor 2 (Sp | oouse Only in a Joint C | ase): |
| 15. Tell the | e court | You must check one: | | | You must check one: | | |
| | | counseling agen | ing from an approved cred cy within the 180 days bef ptcy petition, and I receive npletion. | ore I | counseling ager | fing from an approved oncy within the 180 days uptcy petition, and I recompletion. | before I |
| | w requires that ceive a briefing | | ne certificate and the paymer veloped with the agency. | nt plan, | | the certificate and the payeveloped with the agency. | ment plan, |
| file for You m | eling before you bankruptcy. ust truthfully | counseling agen | ing from an approved cred cy within the 180 days bef ptcy petition, but I do not I npletion. | ore I | counseling ager | fing from an approved oncy within the 180 days uptcy petition, but I do rapletion. | before I |
| followi you ca | one of the ing choices. If unnot do so, you teligible to file. | | er you file this bankruptcy pe opy of the certificate and pay | | | er you file this bankruptcy opy of the certificate and | |
| If you f court c case, y whate | file anyway, the can dismiss your vou will lose ver filing fee you and your | from an approve obtain those ser made my reques | ked for credit counseling so d agency, but was unable vices during the 7 days aft t, and exigent circumstand mporary waiver of the | to er I | from an approve obtain those semade my reques | ked for credit counseling agency, but was unally vices during the 7 days st, and exigent circumstemporary waiver of the | ble to after I |
| credito | ors can begin ion activities | requirement, attac efforts you made t unable to obtain it | by temporary waiver of the ch a separate sheet explaining o obtain the briefing, why you before you filed for bankrup; mstances required you to file | were tcy, and | requirement, atta efforts you made unable to obtain i | ay temporary waiver of the ch a separate sheet explato to obtain the briefing, why t before you filed for bank umstances required you to | iining what you were ruptcy, and |
| | | | e dismissed if the court is diss for not receiving a briefing be ruptcy. | | | e dismissed if the court is a for not receiving a briefin ruptcy. | |
| | | receive a briefing must file a certifica with a copy of the | fied with your reasons, you m within 30 days after you file. N te from the approved agenc payment plan you developed o, your case may be dismisse | You ry, along d, if any. | receive a briefing must file a certific with a copy of the | offied with your reasons, you within 30 days after you find the approved agong payment plan you develoo, your case may be dism | le. You ency, along oped, if any. |
| | | | ne 30-day deadline is granted nited to a maximum of 15 day | | | the 30-day deadline is gra mited to a maximum of 15 | |
| | | I am not required counseling beca | I to receive a briefing abou use of: | t credit | I am not require counseling beca | d to receive a briefing al ause of: | bout credit |
| | | ☐ Incapacity. | I have a mental illness or a r deficiency that makes me incapable of realizing or ma rational decisions about fina | king | Incapacity. | I have a mental illness or deficiency that makes m incapable of realizing or rational decisions about | ne making |
| | | Disability. | My physical disability causes be unable to participate in a briefing in person, by phone through the internet, even a reasonably tried to do so. | a e, or | Disability. | My physical disability ca be unable to participate briefing in person, by ph through the internet, ever reasonably tried to do so | in a none, or en after l |
| | | Active duty. | I am currently on active milit duty in a military combat zor | | Active duty. | I am currently on active duty in a military combat | |
| | | about credit coun | are not required to receive a seling, you must file a motion ounseling with the court. | | about credit cour | are not required to receiveseling, you must file a mot ounseling with the court. | e a briefing |

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Jasmine Parker Signature of Debtor 1 Signature of Debtor 2 Executed on _ 8/31/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Jasmine | | Parker | Case number (if | known) |
|--|----------------------------|-------------------------|---------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | er Chapter 7, 11, 12, | or 13 of title 11, Unite | nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requi | red by 11 U.S.C. § 34 | 12(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the inf | formation in the sched | lules filed with the petition is incorrect. |
| attorney, you do not | 4.5 | | | |
| need to file this page. | /s/ Kashwal Kaur | | Date _ | 8/31/2017 |
| | Signature of Attorney for | r Debtor | | IM / DD / YYYY |
| | | | | |
| | | | | |
| | Kashwal Kaur | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Aver | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | Contact phone | | - " | |
| | Contact phone | | Email address | kkaur@semradlaw.com |
| | | | Illinois | |
| | Bar number | | State | <u> </u> |
| | Dai Halliboi | | Otato | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Jasmine | | Parker |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filir | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | ' |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$11,458.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$11,458.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | , |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$99,460.98 |
| Your total liabilities | \$99,460.98 |
| Part 3: Summarize Your Income and Expenses | |
| ato. Cummanzo i cui mocino una Exponeco | |
| Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,898.89 |
| Copy your combined monthly income norm line 12 or careaute f | |
| | |

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Parker Debtor 1 Jasmine _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,419.21 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$31,882.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$31,882.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | informa | ation to identify your ca | ase: | | - | | | |
|--|------------------------------|---|--|-----------------------|---|-------------------------|---|--|
| | | | | | Davison | | | |
| Debtor 1 | _ | Jasmine First Name | Middle N | lame | Parker Last Name | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if fil | ling) F | First Name | Middle N | lame | Last Name | | | |
| United Sta | ates Ban | kruptcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case num (If known) | ber _ | | | | | | | |
| | | 100A/D | | | | | | Check if this is an |
| | | rm 106A/B | | | | | | amended filing |
| Sche | dule | A/B: Prope | rty | | | | | 12/1 |
| category v responsibl write your | where y le for su name | rou think it fits best. B upplying correct inform and case number (if k | se as complete a mation. If more s nown). Answer e | nd ac pace very | | eople are to this fo | e filing together, both a orm. On the top of any a | re equally |
| Part 1: | Descr | ibe Each Residenc | e, Building, Laı | nd, o | r Other Real Estate You Own o | r Have a | n Interest In | |
| | | | uitable interest i | in an | residence, building, land, or simila | r propert | y? | |
| ✓ | No. Go | to Part 2 | | | | | | |
| | Yes. W | here is the property? | | | | | | |
| | | | | Wh | at is the property? Check all that appl | ly. | | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| 1.1 | Street a | address, if available, or o | other description | Ш | Single-family home | | | nims Secured by Property. |
| | | | | | Duplex or multi-unit building Condominium or cooperative | | Current value of the | Current value of the |
| | | | | H | Manufactured or mobile home | | entire property? | portion you own? |
| | | | | H | Land | | | |
| | Numbe | er Street | | Ħ | Investment property | | Describe the nature of interest (such as fee s | |
| | City | State | Zip Code | | Timeshare Other | | the entireties, or a life | |
| | City | State | Zip Code | | <u> </u> | | Chook if this is as | mmunity property |
| | | | | Wh | o has an interest in the property? Cl | heck | (see instructions) | mmunity property |
| | | | | one | | | | |
| | | | | H | Debtor 1 only Debtor 2 only | | | |
| | | | | H | Debtor 1 and Debtor 2 only | | | |
| | | | | H | At least one of the debtors and anothe | er | | |
| | | | | Oth | er information you wish to add abou | ut this ite | m, such as local | |
| | | | | pro | perty identification number: | | | |
| If you | own or | have more than one, lis | st here: | VA/In- | ot in the common costs O Ob and a college wheat common | L. | Da wat dado at assumed | alaima au avanatiana Dut |
| 1.2 | | | | | at is the property? Check all that appl Single-family home | ıy. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| | Street a | address, if available, or o | other description | Η | Duplex or multi-unit building | | Creditors Who Have Cla | ims Secured by Property. |
| | | | | H | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | Ħ | Manufactured or mobile home | | ————— | —————— |
| | Numbe | er Street | | | Land | | December the material | f |
| | IVUIIID | or order | | | Investment property | | Describe the nature of interest (such as fee s | simple, tenancy by |
| | City | State | Zip Code | \blacksquare | Timeshare Other | | the entireties, or a life | e estate), if known. |
| | | | | Ш | | | Check if this is co | mmunity property |
| | | | | | o has an interest in the property? Cl | heck | (see instructions) | , , , , , , |
| | | | | one | Debtor 1 only | | | |
| | | | | | Debtor 2 only | | | |
| | | | | H | Debtor 1 and Debtor 2 only | | | |
| | | | | H | At least one of the debtors and anothe | er | | |
| | | | | Oth | er information you wish to add abou | ut this ite | m, such as local | |
| | | | | pro | perty identification number: | | | |

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| Debtor 1 | Jasmine First Name | Middle Name | Parker Last Name | Case number | (if known) | |
|-------------|--|--|--|-------------------|---|---|
| 1.3 Stre | eet address, if available, or ot | v | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nui | mber Street | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature o interest (such as fee s the entireties, or a life | imple, tenancy by e estate), if known. |
| | | [] [] [] [] | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an other information you wish to add roperty identification number: | nother | Check if this is co (see instructions) | mmunity property |
| | the dollar value of the po we attached for Part 1. W | rtion you own for a rite that number he | II of your entries from Part 1, inclere. | uding any entries | for pages | |
| | Describe Your Vehicle | | in any vehicles, whether they are | registered or no | t? Include any vehicles | |
| you own 1 | that someone else drives. If your ans, trucks, tractors, sport uto | you lease a vehicle, a | also report it on Schedule G: Executo | - | • | |
| 3.1 | Model: Year: | Chevrolet Impala 1995 | Who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 1995 Hyundai Tucson | 80000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community | | Current value of the entire property? \$5853.00 | Current value of the portion you own? \$5853.00 |
| 3.2 | Make Model: Year: | | who has an interest in the proone. Debtor 1 only | perty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar | | Current value of the entire property? | Current value of the portion you own? |

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| N Y | | Middle Name | Last Name | | |
|---|---|-------------|---|--|---|
| Α | Лаке Лodel: 'ear: | | Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu | claims or exemptions. I ured claims on <i>Schedule</i> aims Secured by Proper |
| | Approximate mileage: | | Debtor 2 only | Current value of the | Current value of the |
| C | Other information: | | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | | At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | | |
| | /lake | | Who has an interest in the property? Check | | claims or exemptions. |
| | ∕lodel: ′ear: | - | one. Debtor 1 only | _ | ured claims on <i>Schedul</i> aims Secured by Proper |
| | Approximate mileage: | | = ' | | , |
| | | | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| C | Other information: | | Debtor 1 and Debtor 2 only | | |
| | | | At least one of the debtors and another | | |
| L | | | Check if this is community property (see instructions) | | |
| Ye | es | | | | |
| 4.1 N | Лаке Лodel: | | Who has an interest in the property? Check one. | the amount of any secu | ured claims on <i>Schedui</i> |
| 4.1 M M Y | Лаке Лodel: ′ear: | | one. Debtor 1 only | the amount of any sect Creditors Who Have Cla | ured claims on <i>Schedul</i> aims Secured by Proper |
| 4.1 M N Y | Make Model: Year: Approximate mileage: | <u>=</u> | one. Debtor 1 only Debtor 2 only | the amount of any secu Creditors Who Have Cla Current value of the | ured claims on Schedul aims Secured by Proper Current value of the |
| 4.1 M N Y | Лаке Лodel: ′ear: | <u></u> | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any sect Creditors Who Have Cla | ured claims on <i>Schedul</i> aims Secured by Proper |
| 4.1 M N Y | Make Model: Year: Approximate mileage: | <u></u> | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | the amount of any secu Creditors Who Have Cla Current value of the | ured claims on Schedur aims Secured by Proper Current value of the |
| 4.1 M N Y | Make Model: Year: Approximate mileage: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any secu Creditors Who Have Cla Current value of the | ured claims on Schedur aims Secured by Proper Current value of the |
| 4.1 M N Y | Make Model: 'ear: Approximate mileage: Other information: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check | the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured | claims on Schedulaims Secured by Proper Current value of the portion you own? Claims or exemptions. |
| 4.1 M M Y A A C C C C C M M M M M M M M M M M M M | Make Model: Vear: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | the amount of any sector Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any sector Creditors Who Have Class Current value of the entire property? | claims or exemptions. ured claims on Schedulaims Secured by Proper Current value of the portion you own? claims or exemptions. ured claims on Schedul |
| 4.1 M M Y A A C C | Make Model: Vear: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | the amount of any sector Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any sector Creditors Who Have Class Current value of the entire property? | claims or exemptions. |
| 4.1 M M Y A A C C | Make Model: Vear: Approximate mileage: Other information: Make Model: Vear: Approximate mileage: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | the amount of any sect Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any sect Creditors Who Have Class Current value of the | claims or exemptions. ured claims on <i>Schedul</i> aims Secured by Proper Current value of the |
| 4.1 M M Y A A C C | Make Model: Vear: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | the amount of any sect Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any sect Creditors Who Have Class | claims on Schedule aims Secured by Proper Current value of the portion you own? claims or exemptions. ured claims on Schedule aims Secured by Proper |
| 4.1 M M Y A A C C | Make Model: Vear: Approximate mileage: Other information: Make Model: Vear: Approximate mileage: | | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | the amount of any sect Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any sect Creditors Who Have Class Current value of the | claims or exemptions. claims or exemptions. claims or exemptions. claims or exemptions. claims Secured by Proper Current value of the |

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... 3 Bedroom Sets \$1000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... 3 TVs, Cellphone \$700.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Misc. Used Clothing \$600.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Ring, Earrings \$1000.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$5400.00 for Part 3. Write that number here

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$5.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Wood Forest \$200.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Jasmine | | Parker | Case number (if known) | |
|------|--|--|----------------------------|---|--|
| | First Name | Middle Name | Last Name | · , | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer a lissuer name: | checks, promissory no | tes, and money orders. | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | | . thrift savings accounts | s, or other pension or profit-sharing plans | |
| | No No | , | , amir caringo account | , or early parities or promormating plane | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | - | | |
| | | • | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | Examples: Agreements companies, or others No | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debt | or 1 Jasmine | AC. 1 11 A. | Parker | Case number (if known) | |
|-------|--|--|---|--|--|
| 24. | | | unt in a qualified ABLE program, or u | nder a qualified state tuition program. | |
| | | 30(b)(1), 529A(b), and 529(b |)(1). | | |
| | ✓ No Yes | Institution name and descript | ion. Separately file the records of any inte | erests.11 U.S.C. § 521(c): | |
| | | | | | |
| | | | | | |
| 25. | | ble or future interests in pr or your benefit | operty (other than anything listed in I | ine 1), and rights or powers | |
| | ✓ No | | | | |
| | Yes. Desci | ibe | | | |
| 26. | Patents conv | rights trademarks trade s | ecrets, and other intellectual propert | v | |
| 20. | | | , proceeds from royalties and licensing a | | |
| | ✓ No | dib a | | | |
| | Yes. Desci | ibe | | | |
| 27. | Licenses, fran | nchises, and other general i | ntangibles | | |
| | Examples: Buil | ding permits, exclusive license | es, cooperative association holdings, liqu | or licenses, professional licenses | |
| | ✓ No Yes. Descri | ibe | | | |
| | | | | | |
| Mon | ov or propor | ty owed to you? | | | Comment value of the |
| | iev or proper | N OWED TO VOLLE | | | |
| IVIOI | .o, c. p. cpc. | y owed to you. | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ov | | | | portion you own? |
| | Tax refunds ov | red to you | | Estable | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ov ✓ No — Yes. Give s about | pecific information them, including whether | | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ov No Yes. Give s about you a | ved to you pecific information | | Federal: State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th | pecific information them, including whether lready filed the returns ne tax years | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds ov No Yes. Give s about you a and th | pecific information them, including whether lready filed the returns the tax years | oousal support, child support, maintenan | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether lready filed the returns the tax years | ousal support, child support, maintenan | State: Local: ce, divorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether lready filed the returns the tax years | ousal support, child support, maintenan | State: Local: ce, divorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether lready filed the returns the tax years | ousal support, child support, maintenan | State: Local: ce, divorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether lready filed the returns the tax years | ousal support, child support, maintenan | State: Local: ce, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past | pecific information them, including whether lready filed the returns the tax years | ousal support, child support, maintenan | State: Local: ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov ✓ No Yes. Give s about you a and ti Family support Examples: Past ✓ No Yes. Give s | pecific information them, including whether lready filed the returns the tax years | ousal support, child support, maintenan | State: Local: ce, divorce settlement, property settlement Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and ti Family support Examples: Past No Yes. Give s Other amounts Examples: Unpa | pecific information them, including whether lready filed the returns the tax years | ousal support, child support, maintenan payments, disability benefits, sick pay, vans you made to someone else | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov ✓ No Yes. Give s about you a and the stamples: Past ✓ No Yes. Give s ✓ No Yes. Give s ✓ No No Yes. Give s | pecific information them, including whether lready filed the returns ne tax years | payments, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ov No Yes. Give s about you a and th Family support Examples: Past No Yes. Give s Other amount: Examples: Unpa | pecific information them, including whether lready filed the returns ne tax years | payments, disability benefits, sick pay, v | State: Local: Ce, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Jasmine | | Parker | Case number (if known) | |
|------|--|--------------------------|---|---|--|
| | First Name | Middle Nam | e Last Name | | |
| 31. | Interests in insurance Examples: Health, disabi | | ealth savings account (HSA); credit, h | omeowner's, or renter's insurance | |
| | Yes. Name the insur of each policy and li | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | | of a living trust, expec | n someone who has died t proceeds from a life insurance polic | y, or are currently entitled to receive | |
| 33. | Claims against third pa | | t you have filed a lawsuit or made surance claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and to set off claims No Yes. Describe | unliquidated claims c | of every nature, including countere | claims of the debtor and rights | |
| 35. | Any financial assets your No Yes. Describe | ou did not already list | | | |
| 36. | | - | om Part 4, including any entries fo | | \$205.00 |
| Part | _ | | | nterest In. List any real estate in Pa | rt 1. |
| 37. | No. Go to Part 6. Yes. Go to line 38. | ny legal or equitable i≀ | nterest in any business-related pr | operty? | Current value of the portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable o | r commissions you al | ready earned | | or exemptions |
| | Yes. Describe | | | | |
| 39. | | | | achines, rugs, telephones, desks, chairs, ele | ectronic devices |
| | ✓ No Yes. Describe | | | | |
| | | | | | |

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| Debt | tor 1 Jasmine | Parker | Case number (if known) | |
|-------|--|--|-------------------------------|--|
| | First Name Middle Nam | e Last Name | | |
| 40. | Machinery, fixtures, equipment, supplies yo | ou use in business, and tools of your t | rade | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | Tes. Describe | | | |
| | | | | |
| 41 | Inventory | | | |
| 71. | inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |
| 42. | Interests in partnerships or joint ventures | | | |
| | ✓ No | | | |
| | | Name of entity: | % of ownership: | |
| | Yes. Give specific information about | | | |
| | them | | | - |
| | | | | <u> </u> |
| | | | | |
| | | | | _ |
| 43. | Customer lists, mailing lists, or other compile | ations | | |
| | ✓ No | | | |
| | Yes. Do your lists include personally identif | fiable information (as defined in 11 U.S.0 | C. § 101(41A))? | |
| | | | | |
| | No | | | |
| | Yes. Describe | | | |
| | — | | | |
| 44. | Any business-related property you did not a | lready list | | |
| | ☑ No | | | |
| | igsquare | | | |
| | Yes. Give specific information | | | |
| | imormation | - | | |
| | | | | |
| | | | | |
| | | - | | |
| | | | | |
| | | | | |
| | | - | | |
| | | | | |
| | dd the dollar value of all of your entries from | | | |
| or Pa | art 5. Write that number here | | | |
| | G: Describe Any Farm- and Commerc | cial Fishing-Related Property Yo | ou Own or Have an Interest In | L |
| Part | If you own or have an interest in farmland, list | | our or riavo air intorcot ini | |
| | | | | |
| 46. | Do you own or have any legal or equitable i | interest in any farm- or commercial f | ishing-related property? | |
| | No. Go to Part 7. | | | Current value of the |
| | Yes. Go to line 47. | | | portion you own? Do not deduct secured claims |
| | | | | or exemptions |
| 47. | Farm animals | | | |
| | Examples: Livestock, poultry, farm-raised fish | | | |
| | □ No | | | |
| | No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |

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| Debt | tor 1 Jasmine First Name | | Parker (| Case number (if known) | |
|--------------|-----------------------------|---|-------------------------|--------------------------------|--------------|
| 48. | Crops-either growing | | | | |
| | No Yes. Describe | | | | |
| 49. | Farm and fishing equip | oment, implements, machinery, fixture | es, and tools of trade | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| 50. | Farm and fishing supp | lies, chemicals, and feed | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. | | rcial fishing-related property you did | not aiready list | | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| | | l of your entries from Part 6, includin | | ı have attached | |
| • | | | | L | |
| | | | | | |
| Part ' | 7: Describe All Pro | perty You Own or Have an Intere | est in That You Did Not | List Above | |
| 53. | | perty of any kind you did not already l s, country club membership | ist? | | |
| | ✓ No | -,, | | | |
| | Yes. Give specific | | | | |
| | information | | | | |
| | | | | | |
| 54. A | dd the dollar value of al | I of your entries from Part 7. Write th | at number here | | • |
| | | • | | | |
| | | | | | |
| | | | | | |
| Doub | o List the Tatala of | Each Part of this Form | | | |
| Part 8 | List the Totals of | Each Part of this Porth | | | |
| 55. F | Part 1: Total real estate | , line 2 | | > | |
| 56. r | oart 2 total vehicles, lin | e 5 | \$5853.00 | | |
| 57. P | art 3: Total personal an | nd household items, line 15 | \$5400.00 | | |
| 58. P | art 4: Total financial as | sets, line 36 | \$205.00 | | |
| 59. F | Part 5: Total business-re | elated property, line 45 | | | |
| 60. F | Part 6: Total farm- and t | ishing-related property, line 52 | | | |
| 61. F | Part 7: Total other prop | erty not listed, line 54 | | | |
| 62.1 | Fotal personal property. | Add lines 56 through 61 | \$11458.00 | Copy personal property total ▶ | + \$11458.00 |
| | | | | | \$11458.00 |
| 63. T | otal of all property on S | chedule A/B. Add line 55 + line 62 | | | |

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| Debtor 1 | Jasmine | | Parker | Case number (if known) | |
|----------|------------|-------------|-----------|------------------------|--|
| | First Name | Middle Name | Last Name | | |

Schedule A/B: Property. Additional page

| Part 3: Describe | Part 3: Describe Your Personal and Household Items | | | | | | |
|--------------------|--|----------|--|--|--|--|--|
| Do you own or ha | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | | | | |
| 6.2. Household goo | ds and furnishings | | | | | | |
| No | | | | | | | |
| Yes. Describe | Leather Sectional | \$800.00 | | | | | |
| 6.3. Household goo | ds and furnishings | | | | | | |
| No | | | | | | | |
| Yes. Describe | Diningroom set | \$800.00 | | | | | |
| 6.4. Household goo | ds and furnishings | | | | | | |
| No | | | | | | | |
| Yes. Describe | Washer/Dryer | \$500.00 | | | | | |

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| | | Do | cument Pag | je 21 of 69 |
|-------------------------------|--|--|--|--|
| Fill in this infor | mation to identify your c | ase: | | |
| Debtor 1 | Jasmine | | Parker | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| Case number | | | (State) | |
| Official | Form 106C | | | Check if this is a amended filing |
| Schedul | e C: The Prop | erty You Claim | n as Exempt | 04/1 |
| information. Uas exempt. If | Jsing the property yo more space is needed | u listed on <i>Schedule A</i> | /B: Property (Official his page as many co | ther, both are equally responsible for supplying correct Form 106A/B) as your source, list the property that you claim upies of <i>Part 2: Additional Page</i> as necessary. On the top of any |
| state a speci the amount o | fic dollar amount as of any applicable stat | exempt. Alternatively, tutory limit. Some exe | , you may claim the mptions—such as tl | unt of the exemption you claim. One way of doing so is to full fair market value of the property being exempted up to hose for health aids, rights to receive certain benefits, and exemption of 100% of fair market value |

under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pai | t 1: Identify the Property You Claim | n as Exempt | | | | | | |
|-----|---|--------------------------------------|----------|--|------------------------------------|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/ | B that you claim as e | xemp | ot, fill in the information below. | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | ount of the exemption you claim eck only one box for each exemption. | Specific laws that allow exemption | | | |
| | | Copy the value from Schedule A/B | | | | | | |
| | Brief | ф1 000 00 | | | 735 ILCS 5/12-1001(b) | | | |
| | description: 3 Bedroom Sets | \$1,000.00 | ✓ | \$995.00 | | | | |
| | Line from Schedule A/B: 06 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| | Brief | Φ 7 00 00 | | | 735 ILCS 5/12-1001(b) | | | |
| | description: 3 TVs, Cellphone | \$700.00 | ✓ | \$700.00 | | | | |
| | Line from Schedule A/B: 07 | | | 100% of fair market value, up to any applicable statutory limit | | | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and even No Yes. Did you acquire the property cove No Yes | ry 3 years after that for a | cases | filed on or after the date of adjustment.) | | | | |

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Debtor 1 Jasmine Parker Case number (if known)
First Name Middle Name Last Name

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|--|---|--|
| | Copy the value from Schedule A/B | | |
| Brief description: Ring, Earrings | \$1,000.00 | Ø \$0 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 12 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$600.00 | | 735 ILCS 5/12-1001(a) |
| Misc. Used Clothing | | \$600.00 | _ |
| Line from Schedule A/B: 11 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$5.00 | | 735 ILCS 5/12-1001(b) |
| Cash On Hand | Ψ3.00 | \$5.00 | _ |
| Line from Schedule A/B: 16 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief | \$200.00 | _ | 735 ILCS 5/12-1001(b) |
| description: Checking account, | φ200.00 | \$200.00 | _ |
| Wood Forest | | 100% of fair market value, up to any | |
| Line from Schedule A/B:17 | | applicable statutory limit | |
| Brief | \$800.00 | _ | 735 ILCS 5/12-1001(b) |
| description: Leather Sectional | φου.υυ | \$800.00 | _ |
| Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief | \$800.00 | _ | 735 ILCS 5/12-1001(b) |
| description: Diningroom set | φου.υυ | \$800.00 | _ |
| Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | |
| Brief | # 500.00 | _ | 735 ILCS 5/12-1001(b) |
| description: Washer/Dryer | \$500.00 | \$500.00 | _ |
| Line from Schedule A/B: 06 | | 100% of fair market value, up to any applicable statutory limit | _ |
| Brief description: | \$5,853.00 | £2 400 00; \$0 00 | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |
| Chevrolet Impala, 1995, 1995 Hyundai Tucson | | \$2,400.00; \$0.00 100% of fair market value, up to any | |
| Line from Schedule A/B: 03 | | applicable statutory limit | |

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| | | _ | | | | |
|------------------------|--------------------------------|--|--|--|-----------------------------------|---------------------------------------|
| Fill in this info | rmation to identify your o | ase: | | | | |
| Debtor 1 | Jasmine | | Parker | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | | (State) | | | |
| Case number (If known) | - | | | | | |
| Official | Form 106D | | | | | Check if this is an amended filing |
| Schedu | ule D: Credit | tors Who Ha | ve Claims Secur | ed by Prop | erty | 12/15 |
| more space is | | | e are filing together, both are equals are the entries, and attach it to | | | |
| 1. Do any | creditors have claims | secured by your proper | ty? | | | |
| ✓ No. | Check this box and sub | mit this form to the court v | with your other schedules. You have | ve nothing else to repo | ort on this form. | |
| Yes. | Fill in all of the information | on below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| | | | red claim, list the creditor separately | Column A | Column B | Column C |
| | | editor has a particular claim, alphabetical order according | list the other creditors in Part 2. As g to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports | Unsecured portion |

this claim

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| Debtor 1 Jasmine Parker First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106B). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Winh Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes. Part 1: List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one cerditor holds an particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | | | |
|--|--------------------------------------|---|--|---|--|--|--|---|---|
| First Name | Fill | in this infor | mation to identify your c | ase: | | | | | |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: | Deb | otor 1 | Jasmine | | Parker | | | | |
| United States Bankruptcy Court for the: Northern District of Illinois (State) | | | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: Northern District of Illinois Case number (fixnown) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the reparty to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule 8. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule 9. Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims and partially secured claims and partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and Unexpired Leases (Official Form 106G). Do not include any creditors and partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and unit partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and unit partially secured claims. If unit partially secured claims are listed in Schedule 9. Executory contracts and unit | | | | | | | | | |
| Case number ((Kanown)) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | (Spc | ruse, if filing) | First Name | Middle Name | Last Name | | | | |
| Case number ((Itknown)) Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority am ononpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Uni | ted States E | Sankruptcy Court for the: | Northern | District of Illinois | | | | |
| Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Ves. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | (State) | | | | |
| Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | | | |
| Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Ves. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Of | ficial F | orm 106F/F | | | | Ch | eck if this is a | n amended filing |
| Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | | | | | | | | |
| other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | Sc | chedu | ule E/F: Cre | editors Who | Have Unsec | cured Claims | | | 12/15 |
| Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | othe Forn clair the know | er party to a n 106A/B) a ms that are entries in t wn). | any executory contracts and on <i>Schedule G: Exe</i> I listed in <i>Schedule D: C</i> he boxes on the left. At | s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pa | could result in a claim. expired Leases (Official F Secured by Property. If | Also list executory contracts orm 106G). Do not include a more space is needed, copy | s on <i>Sched</i> iny credito the Part y | lule A/B: Pro ers with partia ou need, fill | perty (Official ally secured it out, number |
| Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | 1. | Do any ci | reditors have priority ur | secured claims against y | ou? | | | | |
| 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | √ No. (| Go to Part 2. | , | | | | | |
| listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) | | Yes. | | | | | | | |
| | 2. | listed, ider As much a Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If mor | is. If a claim has both priorit s in alphabetical order accord e than one creditor holds a | y and nonpriority amounts ding to the creditor's name particular claim, list the oth | , list that claim here and show If you have more than two prer creditors in Part 3. | both priorit | y and nonprio | ority amounts. |
| | | (For an ex | planation of each type of | claim, see the instructions f | or this form in the instructi | on booklet.) | | | |

claim

amount

amount

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 **AFNI** \$3,499.98 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO BOX 3068 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 61702 Illinois Bloomington City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify <u>collecting for all state insurance</u> Is the claim subject to offset? Yes 4.2 **Brickshire Apartments** \$6,000.00 Last 4 digits of account number Nonpriority Creditor's Name 9000 Lincoln Street When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 46410 Merrillville Indiana City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Broken Lease Fees Is the claim subject to offset? **✓** No Yes **CAPITALONE** 4.3 \$512.00 8252 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6/2017 PO BOX 26625 Number As of the date you file, the claim is: Check all that apply. Contingent RICHMOND Virginia 23261 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No Yes

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 Debtor 1 Jasmine
 Parker
 Case number (if known)

 First Name
 Middle Name
 Last Name

| | Your NONPRIORITY Unsecured Claims - Continual After listing any entries on this page, number them beginning | • | Total claim | | | | |
|-----|---|---|-------------|--|--|--|--|
| 4.4 | ComEd | g with 4.5, followed by 4.0, and so forth. | \$400.00 | | | | |
| 4.4 | Nonpriority Creditor's Name | Last 4 digits of account number | | | | | |
| | 3 Lincoln Center Number Street | When was the debt incurred?n/a | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | |
| | Bankruptcy Section | Contingent | | | | | |
| | Oakbrook Terrace Illinois 60181 | Unliquidated | | | | | |
| | City State Zip Code | Disputed | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | Student loans | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Check if this claim relates to a community debt | Other. Specify electric bill | | | | | |
| | Is the claim subject to offset? | | | | | | |
| | <u>✓</u> No | | | | | | |
| | Yes | | | | | | |
| 4.5 | FED LOAN SERV | — Last 4 digits of account number 0003 | \$1,923.00 | | | | |
| | Nonpriority Creditor's Name 400 Maryland Ave SW | When was the debt incurred? 10/2014 | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | |
| | | Contingent | | | | | |
| | Washington District of Columbia 20202 | — Unliquidated | | | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | ·· | | | | | |
| | Debtor 1 and Debtor 2 only | ✓ Student loans | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Is the claim subject to offset? | Other. Specify | | | | | |
| | ✓ No | | | | | | |
| | Yes | | | | | | |
| 4.6 | FEDLOAN | | \$29,959.00 | | | | |
| 4.6 | Nonpriority Creditor's Name | Last 4 digits of account number 0002 | φ29,939.00 | | | | |
| | POB 60610 | When was the debt incurred? 1/2014 | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | |
| | | Contingent | | | | | |
| | HARRISBURG Pennsylvania 17106 City State Zip Code | — Unliquidated | | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: Student loans | | | | | |
| | Debtor 2 only | | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | At least one of the debtors and another | | | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | |
| | Is the claim subject to offset? | Other. Specify | | | | | |
| | ✓ No | _ | | | | | |
| | Yes | | | | | | |

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 Debtor 1 First Name
 Jasmine First Name
 Parker Last Name
 Case number (if known)

| Part 2 | Your NONPRIORITY Unsecured Claims - Continuation | Page | | | | | | |
|--------|--|---|-------------|--|--|--|--|--|
| | After listing any entries on this page, number them beginning with | h 4.5, followed by 4.6, and so forth. | Total claim | | | | | |
| 4.7 | HERITAGE ACCEPTANCE | Last 4 digits of account number | \$12,000.00 | | | | | |
| | Nonpriority Creditor's Name 120 W LEXINGTON | When was the debt incurred? n/a | | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | | Contingent | | | | | | |
| | ELKHART Indiana 46516 | Unliquidated | | | | | | |
| | City State Zip Code | Disputed | | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | |
| | Debtor 2 only | | | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | Check if this claim relates to a community debt | Other. Specify auto deficiency | | | | | | |
| | Is the claim subject to offset? | | | | | | | |
| | ✓ No | | | | | | | |
| | Yes | | | | | | | |
| 4.8 | Hertz Rent A Car | Last 4 digits of account number | \$13,703.00 | | | | | |
| | Nonpriority Creditor's Name 629 West Madison Street | When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. | | | | | | |
| | Number Street | | | | | | | |
| | | Contingent | | | | | | |
| | Oak Park Illinois 60302 | Unliquidated | | | | | | |
| | City State Zip Code | Disputed | | | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | | |
| | Debtor 2 only | Student loans | | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | | | | | | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | | | | | | |
| | Check if this claim relates to a community debt | debts | | | | | | |
| | Is the claim subject to offset? | property damage to vehicle, 2017- Other. Specify M1-010693 | | | | | | |
| | ✓ No | | | | | | | |
| | Yes | | | | | | | |
| 4.9 | REGIONAL RECOVERY SERV | Lock 4 digits of account number 0600 | \$1,575.00 | | | | | |
| | Nonpriority Creditor's Name PO BOX 3333 | Last 4 digits of account number 8628 When was the debt incurred? 1/2013 | | | | | | |
| | Number Street | | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. Contingent | | | | | | |
| | Munster Indiana 46321 | Unliquidated | | | | | | |
| | City State Zip Code Who incurred the debt? Check one. | Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for | | | | | | |
| | Debtor 1 only | | | | | | | |
| | Debtor 2 only | | | | | | | |
| | Debtor 1 and Debtor 2 only | | | | | | | |
| | At least one of the debtors and another | | | | | | | |
| | Check if this claim relates to a community debt | | | | | | | |
| | Is the claim subject to offset? | | | | | | | |
| | ✓ No | ORIGINAL CREDITOR: Other. Specify TANGLEWOOD APARTMENTS | | | | | | |
| | Yes | · · · | | | | | | |

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Ruff Freud Breems Nelson \$7,500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 200 N. Lasalle 2020 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt collecting for IRON BRIDGE Other. Specify REALTY, 2016-M1-718144 Is the claim subject to offset? **✓** No Yes Santander Consumer USA \$20,000.00 4.11 Last 4 digits of account number _ Nonpriority Creditor's Name 14101 MYFORD RD FL 2 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated TUSTIN California 92780 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ automobile Is the claim subject to offset? **✓** No Yes 4.12 Sprint \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 219554 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 64121 Kansas City Missouri City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ cell phone bill Is the claim subject to offset?

✓ No Yes

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 **TMobile** \$240.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 742596 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 45274 Cincinnati Ohio City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ past due cell phone Is the claim subject to offset? **✓** No Yes TRUST REC SV 4.14 \$149.00 Last 4 digits of account number _ 0033 Nonpriority Creditor's Name When was the debt incurred? 11/2012 **541 OTIS BOWEN DRIVE** Number Street As of the date you file, the claim is: Check all that apply. Contingent MUNSTER 46321 Indiana Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: 10 **✓** No

Other. Specify

NIPSCO

Yes

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| Debtor | 2001011 | | Parker | - Case Harrison (Harrison) | | | | |
|---------|---------------|--|---|--|----------------------|--|--|--|
| | First Nam | ne | Middle Name | Last Name | | | | |
| Part 3: | List Ot | hers to Be Notified A | bout a Debt That | You Already List | ed | | | |
| co | llection a | gency is trying to colleggency here. Similarly, it | ct from you for a de f you have more tha | bt you owe to some | one else, list the o | u already listed in Parts 1 or 2. For example, if a riginal creditor in Parts 1 or 2, then list the tyou listed in Parts 1 or 2, list the additional 2, do not fill out or submit this page. | | |
| | atek & Ma | zar | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | |
| _ | | ington # 1313 Street | | Line 4.8 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims ✓ Part 2: Creditors with Nonpriority Unsecured Claims | | |
| _ | hicago ity | Illinois State | 60602 Zip Code | Last 4 digits of | of account number | · | | |

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Debtor 1 Jasmine Parker Case number (if known)

| First Nar | ne Middle Name Last Name | | | |
|-----------------------------|--|-------|------------------------------|-------------------------|
| Part 4: Add th | e Amounts for Each Type of Unsecured Claim | | | |
| | mounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | for s | tatistical reporting purpose | s only. 28 U.S.C. §159. |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| nom rait i | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | · | | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$31,882.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$67,578.98 | |
| | Ci Total Add lines of through Ci | e: | \$99,460.98 | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Jasmine | | Parker | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | (2-33-2) | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Pers | son or compan | y with whom you have | the contract or lease | State what the contract or lease is for |
|------|-------------------------------------|----------------------|-----------------------|---|
| Nar | eenwood Manage ime) BOX 1509 | ement | | Residential Lease, Other, Residential Lease |
| Nur | ımber | Street | | |
| Lor | mbard | Illinois | 60148 | |
| City | Зу | State | Zip Code | |

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| | | | DC | cument ra | gc 33 | 3 01 03 | |
|-----------|-----------------------------|---|--|---|------------|--|----|
| Fill i | n this infor | mation to identify your c | ase: | | | | |
| Deb | tor 1 | Jasmine | | Parker | | | |
| | | First Name | Middle Name | Last Name | | _ | |
| | tor 2 | | | | | | |
| (Spo | use, if filing) | First Name | Middle Name | Last Name | | | |
| Unit | ted States E | ankruptcy Court for the: | Northern | District of Illinois | | | |
| 0 | | | | (State) | | | |
| (If kn | e number _{own)} | - | | | | _ | |
| | | | | | | Check if this is a | an |
| | | | | | | amended filing | |
| Of | ficial | Form 106H | | | | | |
| | | _ | | | | | |
| Sc | hedul | e H: Your Cod | lebtors | | | 12/1 | 5 |
| the eknov | Do you ha No Yes | he boxes on the left. At r every question. ve any codebtors? (If yo | tach the Additional Page | to this page. On the not list either spouse a | top of an | | |
| 2. | Idaho, Lou | | lived in a community pro kico, Puerto Rico, Texas, W | | | mmunity property states and territories include Arizona, California, | |
| | | | er spouse, or legal equiva | lent live with you at th | a tima? | | |
| | | No | or opouse, or legal equive | ione iivo viiai yod at ai | C uiric: | | |
| | | _ | v etata ar tarritary did va | ı livo? | E:II | Fill in the name and current address of that person. | |
| | Ш | 165. III WHICH COMINUM | y state or territory did you | ilive: | FIII | Fill in the name and current address of that person. | |
| | | Name of your angues of | ormer spouse, or legal equ | ivolont | | _ | |
| | | Name of your spouse, i | officer spouse, of legal equ | Ivalerri | | | |
| | | Number Street | | | | _ | |
| | | City | State | Zip (| Code | _ | |
| | In Oak | a Barallar | ataus Barration de | | : | | |
| 3. | ın Column | 1, list all of your codel | otors. Do not include you | r spouse as a codebto | or if your | ur spouse is filing with you. List the person shown in line 2 | |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | 20 | oarrioric | . age o : | | | |
|---|--|--|--------------------------|------------------|---------------------|-----------------------------|-------------------------|
| Fill in this in | nformation to identify | your case: | | | | | |
| Debtor 1 | Jasmine | | Parke | r | | | |
| | First Name | Middle Name | Last N | ame | — Che | eck if this is: | |
| Debtor 2 | g) First Name | Middle Nesse | l a at NI | | - - | An amended filing | |
| (Spouse, il lilli) | 9) First Name | Middle Name | Last N | | | A supplement showing p | oct-notition chapter 19 |
| United States the: Case numbe | s Bankruptcy Court for | Northern | _ District of Illi (S | nois State) | | expenses as of the follow | |
| (If known) | | | | | _ | MM / DD / YYYY | |
| Official | Form 106I | | | | | | |
| Schedu | ıle I: Your In | come | | | | | 12/15 |
| information spouse. If m number (if k | about your spouse. I | | d your spous | se is not filing | with you, do | not include information | on about your |
| _ | ur employment | | Debtor 1 | | | Debtor 2 | |
| informat | ion. | Employment status | ✓ Emplo | wed | | Employed | |
| | ve more than one job, separate page with | . , | | nployed | | Not Employed | |
| | on about additional | Occupation | Clerk | прюусс | | Thet Employed | |
| | part time, seasonal, or | Employer's name | Cook Cou | nty Government | | | |
| - | loyed work. | Employer's address | 118 N Cla | rk St | | | _ |
| | on may include student maker, if it applies. | | Number Sti | | | Number Street | |
| | | | | | | | |
| | | | Chicago | Illinois | 60602 | _ | |
| | | | City | State | Zip Code | City | State Zip Code |
| | | How long employed there? | 2 years 2 i | months | | | |
| Part 2: Gi | ive Details About N | Monthly Income | | | | | |
| | | the date you file this form | n. If you have | nothing to repo | ort for any line, v | write \$0 in the space. Inc | ude your non-filing |
| | ess you are separated. ur non-filing spouse hav | e more than one employer, | combine the | information for | all employers fo | or that person on the lines | below. If you need |
| more space | e, attach a separate she | et to this form. | | For I | Debtor 1 | For Debtor 2 or | |
| | | ary, and commissions (befo , calculate what the monthly | | 2. | \$3,445.02 | non-filing spouse | |
| | te and list monthly ove | rtime pay. | | 3. | + \$0.00 | | |
| | ate gross income. Add li | | | 4. | \$3,445.02 | | Ì |
| | | | | - | | | - |

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| Debtor 1 Jasmine | Parker | Case number | (if | |
|---|------------------------|------------------------|-------------------|-------------------------|
| First Name Middle Name | Last Name | known) For Debtor 1 | For Debtor 2 or | |
| Conviling 4 hors | - 4. | \$3,445.02 | non-filing spouse | |
| Copy line 4 here | | ψ0,440.02 | · | |
| 5. List all payroll deductions: | 5 - | Φ001 07 | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$201.87 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$292.83 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | 5e. | \$0.00 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | 5g. | \$51.44 | | |
| 5h. Other deductions. Specify: | 5h. + | \$0.00 + | | |
| 6. Add the payroll deductions. Add lines $5a+5b+5c+5d+5e+5h$. | +5f + 5g 6. | \$546.1 <u>3</u> | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from l | line 4. 7. | \$2,898.89 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, a the total monthly net income. | ınd 8a. | \$0.00 | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, dependent regularly receive | or a | | | |
| Include alimony, spousal support, child support, maintenand divorce settlement, and property settlement. | ce, 8c. | \$0.00 | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | |
| 8e. Social Security | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (bene under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | - | \$0.00 | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | | |
| | 8h. + | \$0.00 + | | |
| 8h. Other monthly income. Specify: | | | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8 | g + 8h. 9. | \$0.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing | 10. g spouse | \$2,898.89 + | = | \$2,898.89 |
| 11. State all other regular contributions to the expenses that y Include contributions from an unmarried partner, members of your friends or relatives. Do not include any amounts already included in lines 2-10 or an | our household, your o | lependents, your roomm | | |
| Specify: | | | 11. + | - \$0.00 |
| | | | | |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical | | | | \$2,898.89 |
| | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after | er you file this form? | • | | |
| No. | | | | |
| Yes. Explain: | | | | |
| ш . | | | | |

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| | | Docu | iment Page 36 of 69 |) | | |
|---------------------------------|--|--|--|-------------------------|-------------------------|--------------------|
| Fill in this infor | mation to identify | your case: | | | | |
| Debtor 1 | Jasmine | | Parker | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Ness | Look Nove o | An amended filir | ıq | |
| | First Name | Middle Name | Last Name | 브 | | etition chapter 13 |
| United States E | Bankruptcy Court fo | or the: Northern [| District of Illinois (State) | expenses as of | | · |
| Case number (If known) | | | _ | MM / DD / YYYY | | |
| Official | Form 106 | SJ | | | | |
| Schedul | e J: Your I | Expenses | | | | 12/15 |
| information. If (if known). Ans | | | | | | number |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | o to line 2 | | | | | |
| Yes. D | oes Debtor 2 live | in a separate household? | | | | |
| _ [| No | | | | | |
| | Yes. Debtor 2 m | nust file Official Forms 106J-2, <i>Expen</i> | nses for Separate Household of Debi | or 2. | | |
| 2. Do you hav | e dependents? | No | | | | |
| Do not list Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 Child | Dependent's age 7 years | Does deper with you? | ndent live |
| | | | | <u> </u> | ✓ Yes. | |
| | | | Child | 3 years | No. | |
| | | | | | ✓ Yes. | |
| | - | ✓ No Yes | | | | |
| | | oing Monthly Expenses | | | | |
| | _ | our bankruptcy filing date unless y | rou are using this form as a suppl | ement in a Chanter 1 | 3 case to ren | ort |
| | of a date after the | bankruptcy is filed. If this is a sup | | | | |
| | • | non-cash government assistance in ided it on Schedule I: Your Income | - | | Y | our expenses |
| | I or home owners or the ground or lot | hip expenses for your residence. In . 4. | clude first mortgage payments and | | 4. | \$475.00 |
| If not inc | luded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rty, homeowner's, | or renter's insurance | | | 4b. | \$0.00 |

\$0.00

\$0.00

4c.

4d.

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Jasmine Parker Case number (if known)
First Name Middle Name Last Name

| First Name | Middle Name Last | Name | | |
|--|--|--------------------------------------|------------|------------------|
| | | | | Your expenses |
| 5. Additional mortgage payme | nts for your residence, such as home | equity loans | 5. | \$0.00 |
| 6. Utilities: | | | | |
| 6a. Electricity, heat, natural ga | as | | 6a. | \$265.00 |
| 6b. Water, sewer, garbage co | llection | | 6b. | \$50.00 |
| 6c. Telephone, cell phone, In- | ternet, satellite, and cable services | | 6c. | \$250.00 |
| 6d. Other. Specify: | | | 6d | \$0.00 |
| 7. Food and housekeeping sup | pplies | | 7. | \$700.00 |
| 8. Childcare and children's ed | ucation costs | | 8. | \$300.00 |
| 9. Clothing, laundry, and dry c | leaning | | 9. | \$200.00 |
| 10. Personal care products an | d services | | 10. | \$150.00 |
| 11. Medical and dental expens | ses | | 11. | \$100.00 |
| 12. Transportation. Include gas Do not include car payments | | | 12. | \$300.00 |
| 13. Entertainment, clubs, recre | eation, newspapers, magazines, and | books | 13. | \$0.00 |
| 14. Charitable contributions a | nd religious donations | | 14. | \$0.00 |
| 15. Insurance. Do not include insurance ded | ucted from your pay or included in lines | 4 or 20. | | |
| 15a. Life insurance | | | 15a | \$0.00 |
| 15b. Health insurance | | | 15b | \$0.00 |
| 15c. Vehicle insurance | | | 15c | \$0.00 |
| 15d. Other insurance. Specify | <u></u> | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or included in li | nes 4 or 20. | | |
| Specify: | | | 16 | \$0.00 |
| 17. Installment or lease payme | ents: | | 10 | |
| 17a. Car payments for Vehicle | e 1 | | 17a | \$0.00 |
| 17b. Car payments for Vehicle | e 2 | | 17b | \$0.00 |
| 17c. Other. Specify: Storage | Unit Monthly Payment | | 17c | \$117.00 |
| 17d. Other. Specify: | | | 17d | \$0.00 |
| | maintenance, and support that you | | | \$0.00 |
| | le I, Your Income (Official Form 106I) | | 18. | |
| | to support others who do not live with | h you. | | |
| Specify: | as not included in lines 4 on E of this | forms on an Cahadula li Varin Income | 19. | \$0.00 |
| 20a. Mortgages on other property | es not included in lines 4 or 5 of this | form or on Schedule I: Your Income. | 20a | \$0.00 |
| 20b. Real estate taxes. | Solly | | 20b | |
| 20c. Property, homeowner's, | or renter's insurance | | 200 20c | \$0.00 \$0.00 |
| 20d. Maintenance, repair, and | | | | |
| 20e. Homeowner's associatio | | | 20d | \$0.00 |
| 200. Homeowife 3 associatio | or condominant dues | | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 Jasm | | | Parker | Case number (if known) | | |
|-----------------------|--------------------------|--------------------------|--|------------------------|-----|------------|
| First N | lame | Middle Name | Last Name | | | |
| 21. Other. Spe | cify: | | | | 21 | \$0.00 |
| | | | | | | |
| | your monthly expense | S. | | | | \$2,907.00 |
| | nes 4 through 21. | | | \$0.00 | | |
| , , | line 22 (monthly expens | | | \$2,907.00 | | |
| 22c. Add lir | ne 22a and 22b. The res | sult is your monthly exp | enses. | | 22. | |
| 23. Calculate | your monthly net inco | me. | | | | |
| 23a. Copy | ine 12 (your combined | monthly income) from S | Schedule I. | | 23a | \$2,898.89 |
| 23b. Copy | your monthly expenses | from line 22 above. | | | 23b | \$2,907.00 |
| | ct your monthly expens | | ncome. | | | (\$8.11) |
| The re | sult is your monthly net | t income. | | | 23c | |
| | | | pan within the year or do yonodification to the terms of | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Jasmine | | Parker | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | (| | | | |

Official Form 106Dec

| П | Check if this is a | an |
|---|--------------------|----|
| _ | amended filing | |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | 1: Sign Below | | | | | | | |
|-----|--|--|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ✓ No | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. | | | | | | | |
| × | /s/ Jasmine Parker | × | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date 8/31/2017 MM/DD/YYYY | Date MM/DD/YYYY | | | | | | |

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| Fill in this | information to ide | ntify your c | ase: | | | | | | |
|---|------------------------------|-------------------|--------------------|-------------|--------------------|----------------|--------------------|---------------------|---------------------------------|
| Debtor 1 | Jasmine | | | | Parker | | | | |
| 5.1. | First Name | | Middle | Name | Last Nam | е | _ | | |
| Debtor 2 (Spouse, if fil | First Name | | Middle | Name | Last Nam | e | _ | | |
| United Sta | ates Bankruptcy Co | urt for the: | Northern | | District of Illino | is | _ | | |
| Case num | ber | | | | (Stat | e) | | | |
| (If known) | | | | | | | | | Check if this is a |
| Offici | al Form 1 | 107 | | | | | | | amended filing |
| Stater | nent of Fi | nancia | l Δffaire f | for Inc | lividuale | Filina fo | r Rankrı | intev | 04/1 |
| | | | | | | | | | supplying correct |
| information | on. If more space | e is neede | d, attach a sep | | | | | | your name and case |
| number (ı | f known). Answ | er every qı | iestion. | | | | | | |
| Part 1: | Give Details Ab | out Your | Marital Status | and Wh | ere You Lived | Before | | | |
| 1. Wha | at is your current | marital sta | tus? | | | | | | |
| П | Married | | | | | | | | |
| Image: Control of the | Not married | | | | | | | | |
| 2. Dur | ing the last 3 yea | re have vo | u lived anvwhei | re other th | an where you liv | re now? | | | |
| 2. Dui | | ns, nave yo | u mvcu amywnci | c other th | an where you m | c now. | | | |
| | No Yes. List all of th | e places vo | u lived in the las | st 3 vears. | Do not include v | vhere vou live | now. | | |
| | | o places ye | a a a a | , o , o o. | 20110111101000 | | | | |
| | Debtor 1: | | | Dates | Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | | | there | | | | | there |
| | | | | | | Same | as Debtor 1 | | Same as Debtor 1 |
| | 14349 Sandersor | ı Ave. | | _ | 07/0045 | | | | _ |
| | Number Street | | | - | 07/2015 09/2016 | Number St | reet | | From To |
| | Deltan | III: i- | 00410 | 10 _ | 09/2010 | | | | |
| | Dolton City | Illinois State | 60419 Zip Code | | | City | State | Zip Code | |
| | | | | | | Same | as Debtor 1 | | Same as Debtor 1 |
| | | | | _ | | | | | _ |
| | Number Street | | | From _ | | Number St | reet | | From |
| | | | | To _ | | | | | То |
| | City | State | Zip Code | | | City | State | Zip Code | |
| 3 /N/:±1-: | n the leet O ve | . did | ror livo veith a - | nounc or ! | and animalant | n a aamm! | hu nuoneutu et - 1 | to or torritors? // | Community property state- |
| | <i>erritories</i> include Ar | | | | | | | | Community property states .) |
| ₩ | No | | | | | | | | |
| | Yes. Make sure y | ou fill out Sc | hedule H: Your | Codebto | rs (Official Form | 106H). | | | |

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$24492.86 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$39385.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$18991.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and and exclusions) exclusions) Est .YTD Child Support \$700.00 From January 1 of current year until the date you filed for bankruptcy: \$0.00 For last calendar year: (January 1 to December 31, 2016 \$0.00 For the calendar year before that: (January 1 to December 31, 2015

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Parker Debtor 1 Jasmine __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

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| or 1 | Jasmine | | | | rker | Case number | (if known) |
|-------------------|--|--|--|---|--|---|---|
| | First Name | | Middle Name | Las | st Name | | |
| nsi com age | ders include your porations of whic | relatives; a h you are a for a busin | iny general partners in officer, director, less you operate as | s; relatives of any person in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? rou are a general partner; g securities; and any managing domestic support obligations, |
| ✓ | No | | | | | | |
| Ш | Yes. List all pay | ments to a | an insider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | No | _ | ranteed or cosigne | · | Total amount paid | Amount you still owe | Reason for this payment |
| | | | | | | | Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | | | · | | | | |
| | Insider's Name | | | | | | |
| | Insider's Name Number Street | | · | | | | |
| | | State | Zip Code | | | | |

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title contract claim Cook County Circuit Court Pending Hertz v. Jasmine Parker Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2017-M1-010693 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2011 Chevrolet Malibu LS 05/2016 \$0 Santander Consumer USA Creditor's Name Explain what happened PO Box 961245 Number Street Property was repossessed. Property was foreclosed. Fort Worth 76161 Texas Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | or 1 | Jasmine | | Parker | Case number (if known, | ı | |
|------|------------|-------------------------------------|---|----------------------------|--------------------------------|--------------------------|---------------------|
| | | First Name | Middle Name | Last Name | | - | |
| 11. | | | iled for bankruptcy, did a a payment because you | | pank or financial institution, | set off any amou | ints from your |
| | ✓ | No | | | | | |
| | П | Yes. Fill in the details. | | | | | |
| | | • | | Describe the action the | e creditor took | Date action | Amount |
| | | | | Describe the detion th | e creator took | was taken | Amount |
| | | | | | | | |
| | | - · · · · · · | | | | | |
| | | Creditor's Name | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | | | Last 4 digits of account | number: XXXX- | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| | | Oily State | Zip Code | | | | |
| 12. | | | ed for bankruptcy, was an dian, or another official? | y of your property in the | possession of an assignee fo | or the benefit of o | creditors, a court- |
| | | No | | | | | |
| | | | | | | | |
| | Ш | Yes | | | | | |
| D | | List Certain Gifts and | d Contributions | | | | |
| Part | 5 : | List Gertain Girts and | Contributions | | | | |
| 13. | Wi | | filed for bankruptcy, did y | ou give any gifts with a t | otal value of more than \$600 | per person? | |
| | ✓ | No No | | | | | |
| | | Yes. Fill in the details for | or each gift. | | | | |
| | | Gifts with a total value per person | of more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | | |
| | | Person to Whom You Ga | ave the Gift | | | | |
| | | . 0.00 10 11 | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | Number Offeet | | | | | |
| | | City State | Zip Code | | | | |
| | | | · | | | | |
| | | Person's relationship to | you | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Person to Whom You Ga | ave the Gift | | | | |
| | | - | | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to | you | | | | |
| | | | | | | | |

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| | Jasmine | Parker | Case number (if known) | | |
|----------|---|--|--|---|------------------------|
| | First Name Middle Nan | ne Last Name | | | |
| | | | | | |
| 1. Wit | thin 2 years before you filed for bankrup | tcy, did you give any gifts or contribu | tions with a total value of mo | re than \$600 | to any charity? |
| | | | | | |
| ✓ | No | | | | |
| | Yes. Fill in the details for each gift or co | ntribution. | | | |
| | - | | | | |
| | Gifts or contributions to charities | Describe what you contri | | ate you | Value |
| | that total more than \$600 | | C | ontributed | |
| | | | | | |
| | Charitula Nama | | _ | | |
| | Charity's Name | | | | |
| | | | | | |
| | | | | | |
| | Number Street | | | | |
| | | | | | |
| | City State Zip Co | de | | | |
| | • | | | | |
| rt 6· | List Certain Losses | | | | |
| | | | | | |
| | Yes. Fill in the details. Describe the property you lost and how the loss occurred | Describe any insurance of Include the amount that in | surance has paid. List | ate of your | Value of property lost |
| | | pending insurance claims of | n line 33 of Schedule | | |
| | | A/B: Property. | | | |
| | | | _ | | |
| | | <u> </u> | <u> </u> | | |
| art 7: | List Certain Payments or Transfer | S | | | |
| abo | out seeking bankruptcy or preparing a b | | | | anyone you consulte |
| abo | out seeking bankruptcy or preparing a b lude any attorneys, bankruptcy petition prep No | ankruptcy petition? | | | anyone you consulted |
| abo | out seeking bankruptcy or preparing a blude any attorneys, bankruptcy petition prep | ankruptcy petition? | | | anyone you consulted |
| abo | out seeking bankruptcy or preparing a b lude any attorneys, bankruptcy petition prep No | ankruptcy petition? | services required in your bankru | | Amount of payment |
| abo | out seeking bankruptcy or preparing a b lude any attorneys, bankruptcy petition prep No | ankruptcy petition? parers, or credit counseling agencies for Description and value of | services required in your bankru | ptcy. | Amount of |
| abo | out seeking bankruptcy or preparing a b lude any attorneys, bankruptcy petition prep No | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred | services required in your bankru Iny property O W | ptcy. ate payment transfer | Amount of |
| abo | out seeking bankruptcy or preparing a blude any attorneys, bankruptcy petition prep No Yes. Fill in the details. | ankruptcy petition? parers, or credit counseling agencies for Description and value of | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | out seeking bankruptcy or preparing a blude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | out seeking bankruptcy or preparing a blude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | out seeking bankruptcy or preparing a blude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | out seeking bankruptcy or preparing a blude any attorneys, bankruptcy petition prepared No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co | ankruptcy petition? parers, or credit counseling agencies for Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co Email or website address None Person Who Made the Payment, if Not You | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6064: City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co Email or website address None Person Who Made the Payment, if Not You | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6064: City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6064: City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6064: City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6064: City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid Number Street Chicago Illinois 60643 City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid Number Street | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6064: City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |
| abo | No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 60643 City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid Number Street Chicago Illinois 60643 City State Zip Co Email or website address None Person Who Made the Payment, if Not Yo Person Who Was Paid Number Street | Description and value of transferred Attorney's Fee - 0.00 | services required in your bankru Iny property O W | ptcy. ate payment r transfer as made | Amount of payment |

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| Debt | | Jasmine | | | | Case number (if known |) | |
|------|--------------------|---|---|------------------------|---|-------------------------|--|--------------------------------|
| | | First Name | | Middle Name | Last Name | | | |
| | heli Do | o you deal with you not include any pay | ur creditors | or to make payme | ou or anyone else acting on your bo ents to your creditors? on line 16. | ehalf pay or transfel | any property to any | one who promised to |
| | | No Yes. Fill in the det | tails. | | | | | |
| | | | | | Description and value of any pr transferred | operty | Date payment or transfer was made | Amount of payment |
| | | Person Who Was | Paid | | | | | |
| | | Number Street | | | | | | |
| | | City | State | Zip Code | | | | |
| | the Incl | ordinary course o | f your busine ansfers and t nave already li | ess or financial after | ecurity (such as the granting of a secu | | | |
| | | | | | Description and value of proper transferred | | y property or eceived or debts paid | Date d transfer was made |
| | | Parker, Stephanie Person Who Recei 14335 Kenwood Number Street | | | 2005 Hyundai Tucson valued at \$1,586.00 (Per Kelley Blue Book) | Title Transfe Tucson | er of 2005 Hyundai | 08/2017 |
| | | Dolton City Person's relationsl Mother | Illinois State nip to you | 60419 Zip Code | | | | |
| | | Person Who Recei | ived Transfer | | | | | |
| | | Number Street | | | | | | |
| | | City Person's relationsh | State nip to you | Zip Code | | | | |
| 19. | ben | hin 10 years before eficiary? ese are often called a No | asset-protecti | | you transfer any property to a self | s-settled trust or sin | nilar device of which | you are a |
| | Ц | . 55. 1 11 11 11 10 11 11 | | | Description and value of the p | roperty transferred | | Date transfer was made |
| | | Name of trust | | | | | | |

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Parker Debtor 1 Jasmine Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Checking XXXX-Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Public Storage Washer/Dryer, TVs, Livingroom No Name of Storage Facility Name Set, Glass end tables, Dresser, 701 Western Ave Bedroom Set, Portable Bar, Misc. Number Street Number Street clothes

Glendale

City

California

91201 Zip Code State

Zip Code

City

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Parker Debtor 1 Jasmine Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Deb | | Jasmine | | | Parker | Case n | umber (if k | nown) | | |
|------|------------|----------------------------------|---------------------------------|-------------------|--|----------------------|-------------|--------------|------------------------------------|--------------------------------|
| | | First Name | | Middle Name | Last Name | _ | | | | _ |
| 26. | | e you been a part y No | y in any judic | ial or administra | ative proceeding under | r any environmental | l law? Inc | lude settlem | nents and orde | ers. |
| | П | Yes. Fill in the det | ails. | | | | | | | |
| | | | | • | Court or agency | I | Nature of | the case | | Status of the case |
| | | Case title | | | | | | | | Pending |
| | | | | (| Court Name | | | | | On appeal |
| | | Case number | | | NumberStreet | | | | | Concluded |
| | | 1 | | | City State | Zip Code | | | | _ |
| Part | 11: | Give Details Ab | oout Your B | usiness or Co | nnections to Any Bu | ısiness | | | | |
| 27. | With | nin 4 years before | you filed for | bankruptcy, did | you own a business or | have any of the foll | lowing co | nnections to | any business | ? |
| | | A member of A partner in a | a limited liab a partnership | ility company (L | de, profession, or othe LC) or limited liability pa e of a corporation | = | time or pa | art-time | | |
| | | An owner of | at least 5% o | f the voting or e | quity securities of a cor | poration | | | | |
| | _ | | | | | | | | | |
| | lacksquare | No. None of the a | | | | | | | | |
| | | Yes. Check all tha | at apply abov | e and fill in the | details below for each I | ousiness. | | | | |
| | | | | | Describe the nat | ure of the business | | | dentification n cial Security n | umber Do not umber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | - Name of a constitut | | | Dates busir | ness existed | |
| | | City | State | Zip Code | - Name of account | ant or bookkeeper | | From | To | |
| | | | | | | | | | | |
| | | | | | Describe the nat | ure of the business | | | dentification n | umber Do not umber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | - N | | | Dates busir | ness existed | |
| | | 0" | 0 | | name of account | ant or bookkeeper | | | | |
| | | City | State | Zip Code | | | | From | То | |
| | | | | | Describe the nat | ure of the business | | | dentification n | umber Do not umber or ITIN. |
| | | Business Name | | | _ | | | EIN: | | |
| | | Number Street | | | Name of account | ant or bookkeeper | | Dates busir | ness existed | |
| | | City | State | Zip Code | - | ant of bookkeeper | | From | То | |
| | | | | | | | | | | |

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| Deb | tor 1 | Jasmine | | | Parker | Case number (if known) |
|------|----------------|--|--------------|--|-------------------------------|--|
| | | First Name | | Middle Name | Last Name | |
| 28. | | nin 2 years before ditors, or other par No Yes. Fill in the det | ties. | bankruptcy, did yo | u give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | ш | | | | Date issued | |
| | | | | | Date Issueu | |
| | | Name | | | MM/DD/YYYY | |
| | | | | | _ | |
| | | Number Street | | | | |
| | | - | | | - | |
| | | City | State | Zip Code | | |
| Part | t 12: | Sign Below | | | | |
| 1 | true a | ind correct. I unde kruptcy case can | rstand that | making a false states es up to \$250,000, o | ement, concealing proper | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | re of Debtor | | | Signature of Debtor 2 |
| | | J | | | | Date |
| | | Date 8 | 3/31/2017 | | | |
| ı | Did yo | ou attach addition | al pages to | Your Statement of | Financial Affairs for Individ | duals Filing for Bankruptcy (Official Form 107)? |
| | .zi N | lo. | | | | |
| | <u> </u> | es | | | | |
| | — Did yo | ou pay or agree to | pay someor | e who is not an att | orney to help you fill out b | eankruptcy forms? |
| | | | . , | | , , , | |
| | V N | | | | | Attach the Panlementar Patition Pronounce Nation |
| | ∐ ^Y | es. Name of person | l | | | Attach the <i>Bankruptcy Petition Preparer's Notice,</i> Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|
| Debtor 1 | Jasmine | | Parker | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | _ | | (Grato) | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| 1. | For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. | | | | |
|----|---|--|---|--|--|
| | Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |
| | Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | |

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| Debto | r Jasmine | | Parker | Case number (if | |
|---------|------------------------------|---------------------------|--------------------------|--|--|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpire | ed Personal Property Leas | es | | |
| inform | ation below. Do not list | | l leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in th are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). | |
| De | escribe your unexpired | personal property leases | | Will the lease be assumed? | |
| Le | ssor's name: | | | No Yes | |
| | scription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | scription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Part 3: | Sign Below | | | | |
| Und | | | my intention about any | property of my estate that secures a debt and any personal | |
| × | /s/ Jasmine Parker | | × | | |
| 5 | Signature of Debtor 1 | | Sig | nature of Debtor 2 | |
| С | Date 8/31/2017 MM/DD/YYYY | | Da | te MM/DD/YYYY | |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Nortnern Di | strict of Illinois | | |
|-------|--|----------------------------|----------------------------------|------------------------|-----------------|
| In re | Jasmine Parker | | Case No |) | |
| _ | Debtor | | | (If kno | own) |
| | | | Chapter | Chap | ter 7 |
| | DISCLOSURE OF | COMPENSAT | ION OF ATTORNI | EY FOR DEE | BTOR |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and I compensation paid to me within one rendered or to be rendered on behalf | year before the filing of | the petition in bankruptcy, or a | greed to be paid to me | e, for services |
| | For legal services, I have agreed to a | ccept | | | \$1,465.00 |
| | Prior to the filing of this statement I | have received | | | \$0.00 |
| | Balance Due | | | | \$1,465.00 |
| 2 | . The source of the compensation pai | d to me was: | | | |
| | ✓ Debtor | Other (spe | cify) | | |
| 3 | . The source of the compensation pai | d to me is: | | | |
| | ✓ Debtor | Other (spe | cify) | | |
| 4 | I have not agreed to share the atmembers and associates of my l | | sation with any other person unl | less they are | |
| | I have agreed to share the above members or associates of my law the people sharing in the compe | w firm. A copy of the agr | | | |
| 5 | In return for the above-disclosed fee a. Analysis of the debtor's finar bankruptcy; | - | - · | | - |
| | b. Preparation and filing of any | petition, schedules, stat | ements of affairs and plan whic | h may be required; | |
| | c. Representation of the debtor | at the meeting of creditor | ors and confirmation hearing, ar | nd any adjourned hea | rings thereof; |
| 6 | . By agreement with the debtor(s), the | above-disclosed fee doe | es not include the following ser | vices: | |
| | | | | | |
| | | CERT | IFICATION | | |
| | I certify that the foregoing is a comple tor(s) in this bankruptcy proceedings. | te statement of any agre | ement or arrangement for paym | ent to me for represer | ntation of the |
| | 8/31/2017 | | /s/ Kashwal Kaur | | |
| | Date | | Signature of Attorney | у | |
| | | | Semrad Law Firm | | |
| | | | Name of law firm | | |
| | | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury - either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Parker, Jasmine Case No | | |
|-----------------|---|---|-------------------------------------|
| | Debtor(s) | Oase No. | |
| | | Chapter. | Chapter7 |
| | VERIFICA | TION OF CREDITOR MAT | RIX |
| Th knowledge | ne above named Debtors hereby verify the. | at the attached list of creditors is tru | ue and correct to the best of their |
| Date: | 8/31/2017 | /s/ Parker, Jasmin Parker, Jasmine Signature of Deb | |

FEDLOAN POB 60610 HARRISBURG, PA, 17106

FED LOAN SERV 400 Maryland Ave SW Washington, DC, 20202

REGIONAL RECOVERY SERV PO BOX 3333 Munster, IN, 46321

CAPITALONE PO BOX 26625 RICHMOND, VA, 23261

TRUST REC SV 541 OTIS BOWEN DRIVE MUNSTER, IN, 46321

Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

Hertz Rent A Car Dept 1190 PO BOX 121190 Dallas, TX, 75312

Matek & Mazar 77 W. Washington # 1313 Chicago, IL, 60602

Sprint P O Box 629023 El Dorado Hills, CA, 95762

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

AFNI 1310 Martin Luther King Dr Bloomington, IL, 61701

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Brickshire Apartments 9000 Lincoln Street Merrillville, IN, 46410

Ruff Freud Breems Nelson 200 N. Lasalle 2020 Chicago, IL, 60601

TMobile P.O. Box 742596 Cincinnati, OH, 45274

HERITAGE ACCEPTANCE 120 W LEXINGTON ELKHART, IN, 46516

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,465.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.



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As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 08/22/2017

Client Jasnune Palla CI

Attornev

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| Debtor 1 Jasmine First Name | M: 112 M | Parker | _ Case number (if known) _ | |
|---|--|---|--|---|
| | Middle Name | Last Name | | |
| 16. What kind of debts do you have? 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to | ☑ No. | y consumer debts? Coal primarily for a person y business debts? Businvestment or through ou owe that are not conapter 7. Go to line 18. | al, family, or household iness debts are debts the operation of the busumer debts or busine | nat you incurred to obtain siness or investment. ss debts. |
| unsecured creditors? | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,00 10,001-25,0 | 0 📙 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | Betternik | Total Common Com | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | Resound | | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| | I have examined this petition, ar correct. If I have chosen to file under Ch of title 11, United States Code. under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance will understand making a false stat connection with a bankruptcy caboth. 18 U.S.C. §§ 152, 1341, 1 /s/ Jasmine Parker Signature of Debtor 1 | napter 7, I am aware that I understand the relief and I did not pay or agreemed and read the notice the the chapter of title 1 tement, concealing propase can result in fines upon the propage of the summer of the | t I may proceed, if eligible available under each charto pay someone who is required by 11 U.S.C. (1, United States Code, perty, or obtaining moniters.) | ole, under Chapter 7, 11,12, or 13 apter, and I choose to proceed in a not an attorney to help me fill § 342(b). specified in this petition. ey or property by fraud in isonment for up to 20 years, or |
| | Executed on 8/31/2017 MM / DD | | Executed on | MM / DD / YYYY |

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| Fill in this info | rmation to identify your | case: | | | |
|--|--------------------------|-------------------------------|---|--|-------------------------------------|
| Debtor 1 | Jasmine | | Parker | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for the | : Northern | District of Illinois | | |
| Case number | | | (State) | — | |
| (If known) | | | | | |
| Official | Form 106D | ec | | | Check if this is are amended filing |
| Declarat | ion About an | Individual Debto | or's Schedules | | 12/15 |
| f two married | people are filing toget | her, both are equally respons | sible for supplying correct | information. | |
| Part 1: Sign | 1341, 1519, and 3571. | | | | |
| Did you p | ay or agree to pay som | eone who is NOT an attorney | to help you fill out bank | runtcy forms? | |
| IJ No | | | , se merp you am out burne | aproy formo. | |
| <u> </u> | Name of person | | _ Attach Bankruptcy Pe Signature (Official Fo. | etition Preparer's Notice, Declaration, an rm 119). | d |
| Under per that they * /s/ Jasmi Signature o | ne Parker | re that I have read the summ | ary and schedules filed w | | |
| Date 8/31 | | | Date | | Tag is |
| MM/ | DD/YYYY | | MAM | /DD/XXXX | |

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| Debtor | 1 Jasmine | | Parker | Case number (if known) |
|--------------|--|--------------------------------------|-------------------------------|--|
| | First Name | Middle Name | Last Name | |
| 28. Wi cr | ithin 2 years before y editors, or other part 7 No | ou filed for bankruptcy, did ies. | you give a financial state | nent to anyone about your business? Include all financial institutions |
| Ē | Yes. Fill in the deta | ils below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | _ |
| | Number Street | | | |
| | City | State Zip Code | | |
| | = | • | | |
| Part 12: | Sign Below | | | |
| | nkruptcy case can re | stanu mat making a jaise si | atement, concealing nron | ments, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature | of Debtor 1 | | Signature of Debtor 2 |
| | Date 8/3 | 1/2017 | | Date |
| Did y | ou attach additional | pages to Your Statement o | f Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)? |
| | No | | | |
| | /es | | | |
| Did ye | ou pay or agree to pa | ny someone who is not an a | ttorney to help you fill out | bankruptcy forms? |
| ☑ ▷ | √o | | | |
| Ō٧ | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Jebtor Jasmine | | Parker | Case number (if |
|---|--|---|--|
| First Name | Middle Name | Last Name | known) |
| art 2: List Your Unexpired | d Personal Property Leas | es | |
| or any unexpired personal pro nformation below. Do not list ssume an unexpired personal | ieai estate leases, unexpired | l leases are leases that a | Contracts and Unexpired Leases (Official Form 106G), fill in the re still in effect; the lease period has not yet ended. You may J.S.C. § 365(p)(2). |
| Describe your unexpired p | ersonal property leases | | Will the lease be assumed? |
| Lessor's name: | | | No No |
| Description of leased property: | | | Yes |
| Lessor's name: | The state of the s | | □ No □ Yes |
| Description of leased property: | | | |
| Lessor's name: | | M MITTER OF A B. S. S. S. SERVICE LAW S. S. S. S. SERVICE S. | □ No □ Yes |
| Description of leased property: | | n man mars a sension more a more car se proper a sension no sension no sension de sension no sension no sension | of Common Page And Annual Common Comm |
| Lessor's name: | | | No Yes |
| Description of leased property: | | 18 · · · · · · · · · · · · · · · · · · · | |
| Lessor's name: Description of leased property: | | Me | ☐ No ☐ Yes |
| Lessor's name: | Oktobromentekstek (1970-1924) – 1924 – 1934 | a et a transition de la desirable de la tr | No |
| Description of leased property: | and Make Palate (1974 - 1974 - 1984 - 1984) to have the agent of the Astrony to Astrony to Astrony | tin er ei til 1000 til het til het til ste en en en en en en er et e generation et en en en en en en en en en | Yes |
| Lessor's name: | | | □ No □ Yes |
| Description of leased property: | | | |
| t 3: Sign Below | | | |
| Under penalty of perjury, I dec property that is subject to an | clare that I have indicated my unexpired lease. | y intention about any pro | perty of my estate that secures a debt and any personal |
| /s/ Jasmine Parker Signature of Debtor 1 | some full | X Signati | ure of Debtor 2 |
| Date 8/31/2017 MM/DD/YYYY | | Date | MM/DD/YYYY |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| in re: | Parker, Jasmine | Case No | Cono No | | | |
|-----------------|---|--|--------------------------------------|--|--|--|
| Debtor(s) | | Case No | Case No | | | |
| | | Chapter, | Chapter7 | | | |
| | VERIFI | CATION OF CREDITOR MA | TRIX | | | |
| Ti knowledge | ne above named Debtors hereby verit e. | y that the attached list of creditors is t | rue and correct to the best of their | | | |
| Date: | 8/31/2017 | /s/ Parker, Jasm Parker, Jasmine | - A WHING IMA | | | |
| | | Signature of Del | btor | | | |

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| Debtor 1 Jasmine | | Parker | Case number (if | known) | |
|---|---|---|----------------------------|----------------------|----------------------------|
| First Name | Middle Name | Last Name | Column A Debtor 1 | Column B Debtor 2 or | |
| 8. Unemployment compensation Do not enter the amount if you counder the Social Security Act, Inst | ontend that the amount ree | | \$0.00 | non-filing spous | e |
| For your spouse | | \$0.00 \$0.00 | | | |
| Pension or retirement income. benefit under the Social Security A | Do not include any amour | nt received that was a | \$0.00 | | |
| 10.Income from all other sources amount. Do not include any bene payments received as a victim of a international or domestic terrorism page and put the total below. | not listed above. Specify fits received under the Social war crime, a crime against | ial Security Act or | | | |
| Total amounts from separate page | es, if any. | | +\$0.00 | + | |
| 11. Calculate your total current n | | | \$3,419.21 | + | = \$3,419.21 |
| column. Then add the total for (| Column A to the total for C | olumn B. | | | Total current |
| Part 2: Determine Whether the | e Means Test Applies | to You | | | monthly income |
| 12. Calculate your current monthly | | | | | |
| 12a. Copy your total current mont | nly income from line 11. | | | y line 11 here → | \$3,419.21 |
| Multiply by 12 (the number of 12b. The result is your annual inco | | n. | | 12 | X 12 b. \$41,030.52 |
| 13 Calculate the median family inc | ome that applies to you. | Follow these steps: | • | | |
| Fill in the state in which you live. | | Illinois | | | |
| Fill in the number of people in you | household. | 3 | | | |
| Fill in the median family income for household. | your state and size of | | | 1 | 3. \$76,406.00 |
| To find a list of applicable median i instructions for this form. This list r | ncome amounts, go onlin nay also be available at the | e using the link specified bankruptcy clerk's office | in the separate | | <u></u> |
| 14. How do the lines compare? | | | | | |
| 14a. Line 12b is less than or e Go to Part 3. | qual to line 13. On the top | of page 1, check box 1, | There is no presumption of | of abuse. | |
| 14b. Line 12b is more than ling Go to Part 3 and fill out F | e 13. On the top of page ^r orm 122A-2. | , check box 2, The presu | umption of abuse is determ | ined by Form 122A-2. | |
| Part 3: Sign Below | | | | | |
| By signing here. I dealers up desp | | | | | |
| By signing here, I declare under pr | erially of perjory that the in | formation on this stateme | ent and in any attachments | is true and correct. | |
| /s/ Jasmine Parker Signature of Debtor 1 | arme fiel | * <u></u> | making of Dakking | | |
| - | | Sig | nature of Debtor 2 | | |
| Date 8/31/2017 MM/DD/YYYY | | Da | te 8/31/2017 MM/DD/YYYY | | |
| If you checked line 14a, do NOT If you checked line 14b, fill out F | fill out or file Form 122A- form 122A-2 and file it wit | 2. h this form. | | | |